

Youth's Name _____

ID# _____

DATE OF BIRTH _____ DATE OF ASSESSMENT _____

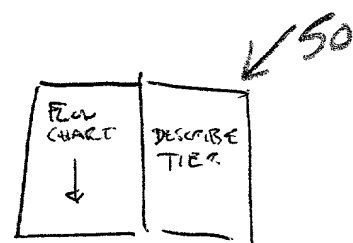
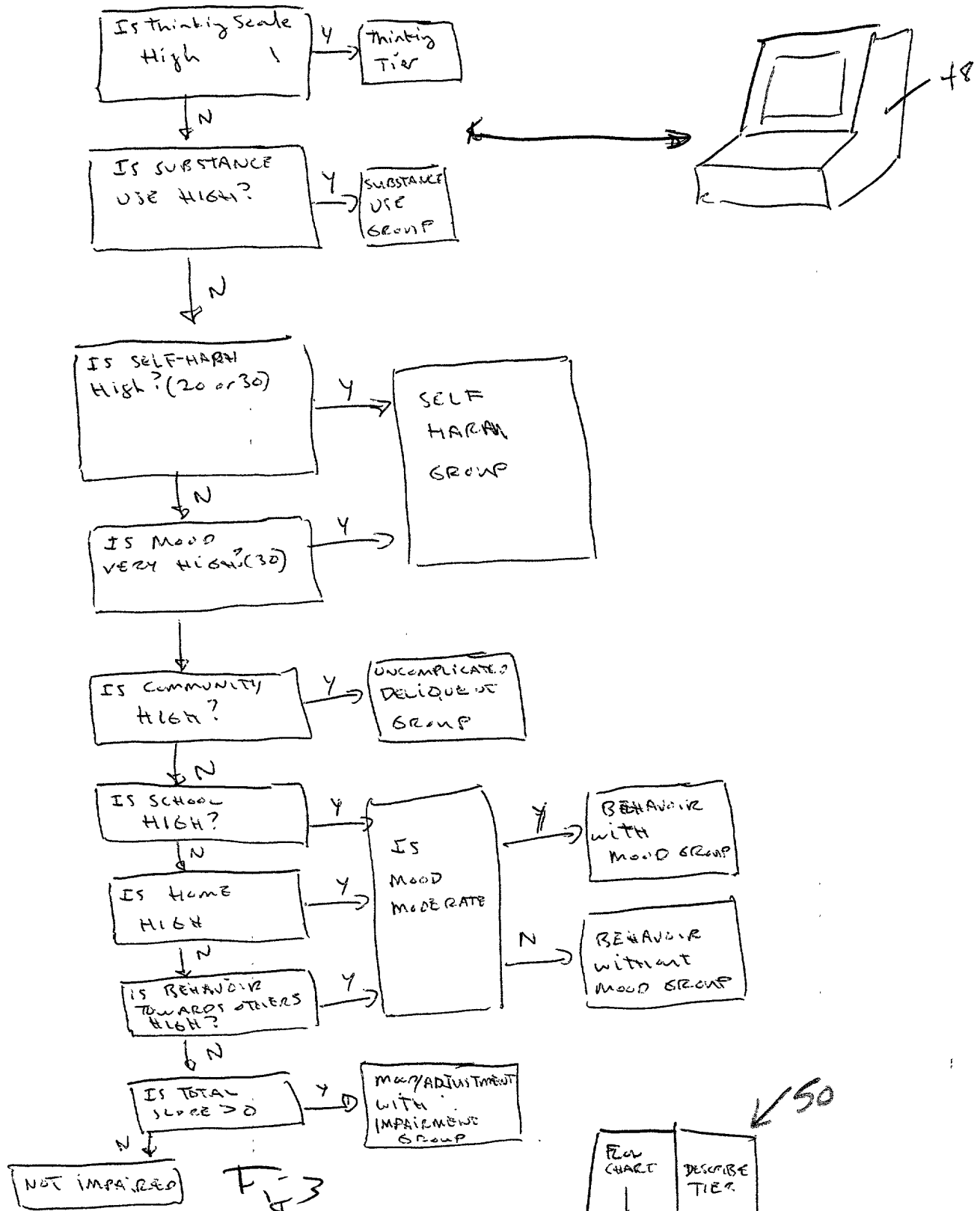
<p>20 →</p> <p>THINKING</p> <p>□</p>	<p>Severe Impairment <i>Severe disruption or incapacitation</i> (30)</p> <p>CANNOT ATTEND A NORMAL SCHOOL CLASSROOM, DOES NOT HAVE NORMAL FRIENDSHIPS, AND CANNOT INTERACT ADEQUATELY IN THE COMMUNITY DUE TO ANY OF THE FOLLOWING:</p> <p>182 Communications which are impossible or extremely difficult to understand due to incoherent thought or language (e.g., loosening of associations, flight of ideas).</p> <p>183 Speech or nonverbal behavior is extremely odd and is noncommunicative (e.g., echolalia, idiosyncratic language).</p> <p>184 Strange or bizarre behavior due to frequent and/or disruptive delusions or hallucinations; can't distinguish fantasy from reality.</p> <p>185 Pattern of short-term memory loss/disorientation to time or place most of the time.</p> <p>↑ 2-2</p>	<p>Moderate Impairment <i>Major or persistent disruption</i> (20)</p> <p>FREQUENT DIFFICULTY IN COMMUNICATION OR BEHAVIOR, OR SPECIALIZED SETTING OR SUPERVISION NEEDED DUE TO ANY OF THE FOLLOWING:</p> <p>187 Communications do not "flow," are irrelevant, or disorganized (i.e., more than other children of the same age).</p> <p>188 Frequent distortion of thinking (obsessions, suspicions).</p> <p>189 Intermittent hallucinations that interfere with normal functioning.</p> <p>190 Frequent, marked confusion or evidence of short term memory loss.</p> <p>191 Preoccupying cognitions or fantasies with bizarre, odd, or gross themes.</p> <p>↑ 2-4</p>	<p>Mild Impairment <i>Significant problems or distress</i> (10)</p> <p>OCCASIONAL DIFFICULTY IN COMMUNICATIONS, IN BEHAVIOR, OR IN INTERACTIONS WITH OTHERS DUE TO ANY OF THE FOLLOWING:</p> <p>193 Eccentric or odd speech (e.g., impoverished, digressive, vague).</p> <p>194 Thought distortions (e.g., obsessions, suspicions).</p> <p>195 Expression of odd beliefs or, if older than eight years old, magical thinking.</p> <p>196 Unusual perceptual experiences not qualifying as pathological hallucinations.</p> <p>↑ 2-6</p>	<p>Minimal or No Impairment <i>No disruption of functioning</i> (0)</p> <p>198 Thought, as reflected by communication, is not disordered or eccentric.</p> <p>↑ 2-8</p>
<p>186 EXCEPTION</p>				
<p>192 EXCEPTION</p>				
<p>197 EXCEPTION</p>				
<p>199 EXCEPTION</p>				
<p>Explanation:</p>				
<p>COULD NOT SCORE: 200</p>				

Fig 1

Level of Impairment	School/Work Role Performance	Home Role Performance	Community Role Performance	Behavior Toward Others	Moods/Emotions	Self-Harmful Behavior	Substance Use	Thinking
SEVERE 30	1 2 3 4 5 6 7 8 9 10 11 ↑ 30 ↘	41 42 43 44 45 46 47 48 49 50 ↑ 32 ↘	66 67 68 69 70 71 72 ↑ 34 ↘	88 89 90 91 92 ↑ 36 ↘	116 117 118 119 120 ↑ 38 ↘	142 143 144 145 ↑ 40 ↘	154 155 156 157 158 159 160 161 162 163 164 ↑ 42 ↘	182 183 184 185 186 ↑ 44 ↘
MODERATE 20	12 13 14 15 16 17 18 19 20 21	51 52 53 54 55 56	73 74 75 76 77 78 79	93 94 95 96 97 98 99 100 101 102	121 122 123 124 125 126 127	146 147 148	165 166 167 168 169 170 171	187 188 189 190 191 192
MILD 10	22 23 24 25 26 27	57 58 59 60 61	80 81 82 83	103 104 105 106 107 108 109 110	128 129 130 131 132 133 134 135	149 150	172 173 174 175	193 194 195 196 197
MINIMAL/NO 0	28 29 30 31 32 33 34 35 36 37 38 39	62 63 64	84 85 86	111 112 113 114	136 137 138 139 140	151 152	176 177 178 179 180	198 199
COULD NOT SCORE	40	65	87	115	141	153	181	200

Fig 2

For each scale: (1) mark the item number(s) which correspond to those marked on the CAFAS form, (2) fill in the circle indicating severity level, (3) connect the circles.



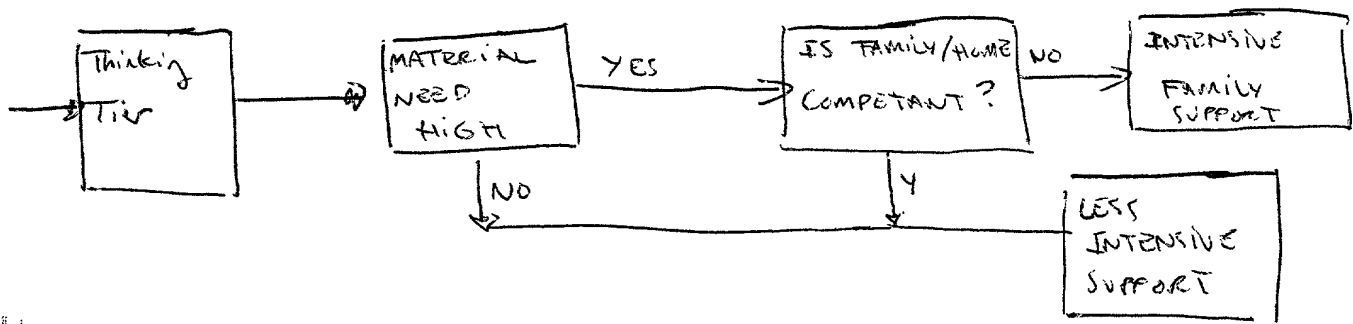


Fig 5

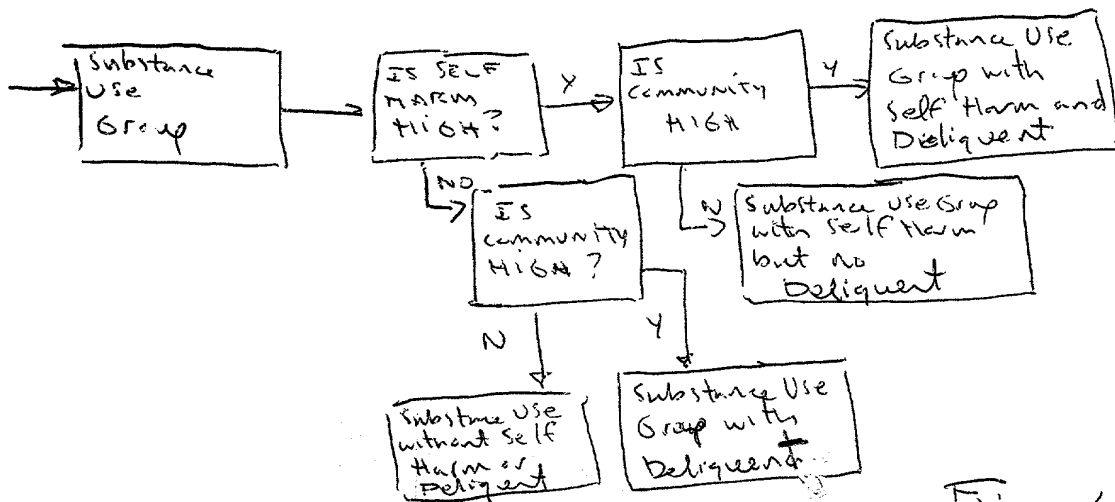
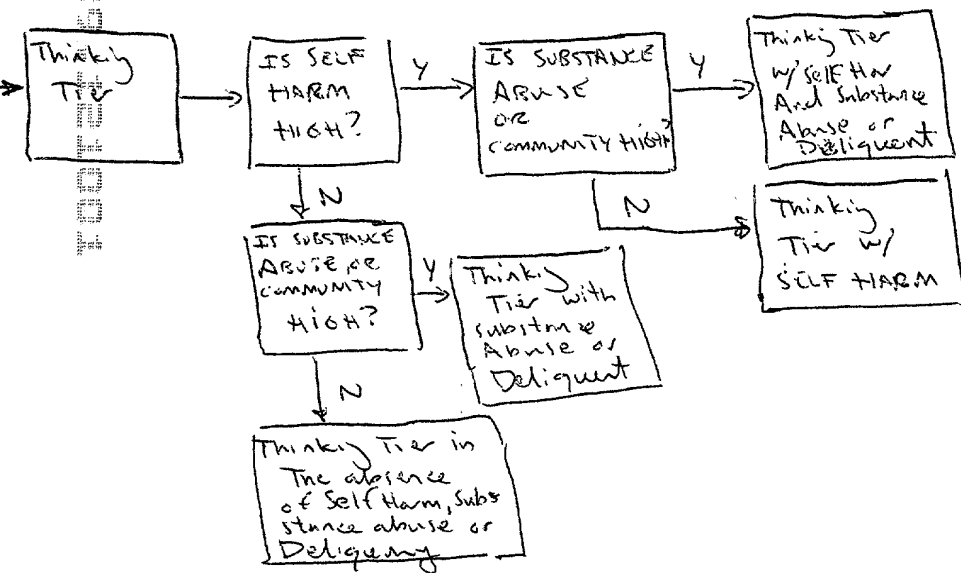


Figure 6